PTO/SB/06 (05-03)

Approved for use through 4/30/2003. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid ONB control number Application op/Locket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 6 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER EXTRA NUMBER FILED RATE FEE RATE FÉE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 20 = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) \_ -- - - - - -OR If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN OR (Cotumn 2) (Column 3) (Column 1) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADD1 RATE ADDI AFTER PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus ENDM CST CFR 1.16(cl) X \$ OR Minus CV CFR 1.16(h)) X S OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +5 OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING MIMPED RATE ADD+ RATE ADDI: **EXTRA** PREVIOUSI Y **AFTER** TIONAL TIONAL' AMENDMENT PAID FOR FFF -FEE:511 ũ Minus Σ X \$ --- = OR Minus OR ....... FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM: (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER **PRESENT** RATE ADDI-RATE ADDI-ENT PREVIOUSLY **EXTRA** AFTER TIONAL TIONAL AMENDMENT PAID FOR FEE ·FEE · Total Minus ENDM G7 CFR 1.16(d) OR Independent (37 CFR 1.16(b)) Minus 1.11 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OŖ ADD'L FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. The temperature of the property of the pro-If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\* a the Milahest Milanaar Presidentity Fra.a Frai If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DATENT ADDITION FOR DETERMINATION DECC								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN R SMALL ENTITY		
TC	TAL CLAIMS				Ŷ.		R	ATE	FEE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	SIC FEE	355.00	OR	BASIC FEE	·710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•		X	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2_ minus 3 =		*		X40=			OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT							OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	OTAL	1	OR	TOTAL		
CLAIMS AS AMENDED - PART II									<u> </u>		OTHER	THAN	
		(Column 1)		(Colu		(Column 3)	SI	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	° ,	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	.**		= .	X	\$ 9=		OR	X\$18=		
<b>VME</b>	Independent	*	Minus	***		=	×	40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							35=			+270=	·	
								TOTAL		OR	TOTAL		
		(0.1		(Column 2) (Column 3)			ADD	IT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS	¢.	HIGH	HEST	(Column 3)	_		ADDI-	1 1		ADDI-	
IDMENT B	e ut	REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA	R	ATE	TIONAL		RATE	TIONAL	
	Total	.//	Minus	6	20	= 0	Х	\$ <sup>`</sup> 9=		OR	X\$18=		
AMEND	Independent	13	Minus	***	3	= 0	X	40=			X80=	-	
	FIRST PRESENTATION OF M		ULTIPLE DEPENDENT		CLAIM					OR	<del>\</del>		
								135=		OR	+270= `		
								TOTAL IT. FEE		ОR	TOTAL ADDIT. FEE		
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									-			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL PÉE	
Ş Ş	Total	· 121	Minus		0	-60)	X	\$ 9= <i>/</i>		OR	X\$18=	18,00	
ME	Independent	1 44	Minus		37	=/3	X	40=		OR	X80=	\$6.00	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		-			1	/	5/	
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2. writ	e "0" in co	olumn 3.	<b>/</b> +1	135= TOTAL		OR	+270=	ITY	
"If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											104,00		
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	dent) is th	e highest numbe	er found i	n the ap	propriate bo	x in co	olumn 1.		